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| <b>TRANSMITTAL LETTER TO THE UNITED STATES<br/>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br/>CONCERNING A SUBMISSION UNDER 35 U.S.C. 371</b>   |  | ATTORNEY'S DOCKET NO.<br>11336.1236 (P03011US)<br>U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5)<br><div style="font-size: 24pt; font-weight: bold; text-align: center;">10/562413</div> |
| INTERNATIONAL APPLICATION NO.<br>PCT/EP2004/006991  | INTERNATIONAL FILING DATE<br>June 28, 2004 | PRIORITY DATE CLAIMED<br>June 27, 2003   |
| TITLE OF INVENTION<br>NAVIGATION METHOD AND NAVIGATION SYSTEM   |  |  |
| APPLICANT(S) FOR DO/EO/US<br>KURT STEGE   |  |  |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:   |  |  |
| <ol style="list-style-type: none"> <li>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371</li> <li>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371</li> <li>3. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9), and (21) indicated below.</li> <li>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).</li> <li>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)).           <ol style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau).</li> <li>b. <input type="checkbox"/> has been transmitted by the International Bureau.</li> <li>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</li> </ol> </li> <li>6. <input type="checkbox"/> An English translation of the International Application into English (35 U.S.C. 371(c)(2)).           <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> is attached hereto.</li> <li>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</li> </ol> </li> <li>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)).           <ol style="list-style-type: none"> <li>a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau).</li> <li>b. <input type="checkbox"/> have been transmitted by the International Bureau.</li> <li>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.</li> <li>d. <input type="checkbox"/> have not been made and will not be made.</li> </ol> </li> <li>8. <input type="checkbox"/> An English translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</li> <li>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</li> <li>10. <input type="checkbox"/> An English translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)) and/or amendments under Article 34.</li> </ol> |  |  |
| <b>Items 11 to 20 Below concern other document(s) or information included:</b>  |  |  |
| <ol style="list-style-type: none"> <li>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</li> <li>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</li> <li>13. <input checked="" type="checkbox"/> A preliminary amendment.</li> <li>14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</li> <li>15. <input type="checkbox"/> A substitute specification.</li> <li>16. <input type="checkbox"/> A power of attorney and/or change of address letter.</li> <li>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821-1.825.</li> <li>18. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).</li> <li>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</li> <li>20. <input checked="" type="checkbox"/> Other items or information: Return Post card.</li> </ol>   |  |  |

SEND COMPLETED FORM TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

| U.S. APPLICATION NO. <b>10/562413</b><br>(If known, see 37 CFR 1.52)   | INTERNATIONAL APPLICATION NO. | ATTORNEY'S DOCKET NO.  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
|--|-------------------------------|--|--------------|--------------------------|------------|--------------|----------|------|------------|--------------------|--------|---------------------|-------------|---|--|--|------------|------------------------------|--|--|--------|--|
| The following fees are submitted:<br>21. <input checked="" type="checkbox"/> Basic national fee (37 CFR 1.492(a)) .....\$300<br>22. <input checked="" type="checkbox"/> Examination fee (37 CFR 1.492(c))<br>If International preliminary report prepared by ISA/US or the examination report prepared by IPEA/US indicates all claims<br>satisfy provisions of PCT Article 33(1)-(4) .....\$0<br>All other situations .....\$200<br>23. <input checked="" type="checkbox"/> Search Fee (37 CFR 1.492(b))<br>If the written opinion of the ISA/US or the International preliminary examination report prepared by IPEA/US indicates all<br>claims satisfy provisions of PCT Article 33(1)-(4) .....\$0<br>Search fee (37 CFR 1.445(a)(2)) has been paid on the international application to the USPTO as an<br>International Searching Authority .....\$100<br>International Search Report prepared and provided to the Office .....\$400<br>All other situations .....\$500<br><br><div style="text-align: right;"> <b>TOTAL OF 21, 22 and 23 = \$1000</b> </div> <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer<br>program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.<br>Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 30 months from the earliest claimed priority date<br>(37 CFR 1.492(e)).<br><table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:25%;">Claims</th> <th style="width:25%;">Number Filed</th> <th style="width:25%;">Number Extra</th> <th style="width:25%;">Rate</th> </tr> <tr> <td>Total Claims</td> <td>20- 20 =</td> <td>0</td> <td>x \$ 50.00</td> </tr> <tr> <td>Independent Claims</td> <td>1- 3 =</td> <td>0</td> <td>x \$ 200.00</td> </tr> <tr> <td colspan="3">Multiple dependent claim(s) if Applicable</td> <td>+ \$360.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL OF ABOVE CALCUATIONS =</td> <td>\$1000</td> </tr> </table> <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.<br><div style="text-align: right;">SUBTOTAL = \$1000</div> Processing fee of \$130.00 for furnishing the English translation later than the <input type="checkbox"/> 30 months from the earliest claimed<br>priority date (37 CFR 1.492(f)).<br><div style="text-align: right;">TOTAL NATIONAL FEE= \$1000</div> Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate<br>cover sheet (37 CFR 3.28, 3.31), \$40.00 per property +<br><div style="text-align: right;">TOTAL FEES ENCLOSED= \$1000</div> |                               | Claims   | Number Filed | Number Extra             | Rate       | Total Claims | 20- 20 = | 0    | x \$ 50.00 | Independent Claims | 1- 3 = | 0                   | x \$ 200.00 | Multiple dependent claim(s) if Applicable |  |  | + \$360.00 | TOTAL OF ABOVE CALCUATIONS = |  |  | \$1000 | CALCULATIONS<br><br><br><br><br><br><br><br><br><br>PTO USE ONLY |
| Claims   | Number Filed                  | Number Extra   | Rate         |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Total Claims   | 20- 20 =                      | 0  | x \$ 50.00   |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Independent Claims   | 1- 3 =                        | 0  | x \$ 200.00  |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Multiple dependent claim(s) if Applicable  |                               |  | + \$360.00   |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| TOTAL OF ABOVE CALCUATIONS =   |                               |  | \$1000       |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| a. <input type="checkbox"/> A check in the amount of \$_____ to cover the above fees is enclosed.<br>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 23-1925 in the amount of \$1000 to cover the above fees. A duplicate copy of this sheet is enclosed.<br>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account<br>No. 23-1925. A duplicate copy of this sheet is enclosed.<br>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. Credit card information should not be included<br>on this form. Provide credit card information and authorization on PTO-2038.<br><br>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the<br>application to pending status.   |                               | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">           Amount to be refunded \$         </td> <td style="width:50%;">           charged \$         </td> </tr> </table>  |              | Amount to be refunded \$ | charged \$ |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Amount to be refunded \$   | charged \$                    |  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Send All Correspondence to:<br>Brinks Hofer Gilson & Lione<br>P.O. Box 10395<br>Chicago, IL 60610  |                               | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;"> </td> <td style="width:50%;"></td> </tr> <tr> <td>Signature</td> <td></td> </tr> <tr> <td>Name</td> <td></td> </tr> <tr> <td>Jason M. Wejnert</td> <td></td> </tr> <tr> <td>Registration Number</td> <td>55,722</td> </tr> </table> |              |                          |            | Signature    |          | Name |            | Jason M. Wejnert   |        | Registration Number | 55,722      |   |  |  |            |                              |  |  |        |  |
|  |                               |  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Signature  |                               |  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Name   |                               |  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Jason M. Wejnert   |                               |  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |
| Registration Number  | 55,722                        |  |              |                          |            |              |          |      |            |                    |        |                     |             |   |  |  |            |                              |  |  |        |  |